

Introduced by Senator Liu

February 18, 2014

An act to amend Sections 124174, 124174.2, and 124174.6 of the Health and Safety Code, and to amend Section 1 of Chapter 381 of the Statutes of 2008, relating to public health.

LEGISLATIVE COUNSEL'S DIGEST

SB 1055, as introduced, Liu. Public School Health Center Support Program.

Existing law requires the State Department of Public Health, in cooperation with the State Department of Education, to establish a Public School Health Center Support Program to assist health centers in schools and school districts. Existing law establishes a grant program within the Public School Health Center Support Program to provide technical assistance, and funding for the expansion, renovation, and retrofitting of existing school health centers and the development of new school health centers. These provisions also provide funding for sustainability grants in amounts between \$25,000 and \$125,000.

This bill would rename the program the School-Based Health and Education Partnership Program. The bill would instead provide funding for the expansion and renovation of existing school health centers. The bill would change the amount of the sustainability grants that are available pursuant to the program to between \$50,000 and \$100,000, but would make those grants available on a one-time basis and would revise the purposes for which they may be used. The bill would also authorize population health grants in amounts between \$50,000 and \$125,000 for a funding period of up to 3 years, as specified.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: no.

The people of the State of California do enact as follows:

SECTION 1. Section 124174 of the Health and Safety Code is amended to read:

124174. The following definitions shall govern the construction of this article, unless the context requires otherwise:

(a) “Program” means ~~a Public School Health Center Support Program~~; *the School-Based Health and Education Partnership Program*.

(b) “School health center” means a center or program, located at or near a local educational agency, that provides age-appropriate health care services at the program site or through referrals. A school health center may conduct routine physical, mental health, and oral health assessments, and provide referrals for any services not offered onsite. A school health center may serve two or more nonadjacent schools or local educational agencies.

(c) For purposes of this section, “local educational agency” means a school, school district, charter school, or county office of education if the county office of education serves students in kindergarten, or any grades from 1 to 12, inclusive.

(d) “Department” means the State Department of Public Health.

SEC. 2. Section 124174.2 of the Health and Safety Code is amended to read:

124174.2. (a) The department, in cooperation with the State Department of Education, shall establish ~~a Public School Health Center Support Program~~; *the School-Based Health and Education Partnership Program*.

(b) The program, in collaboration with the State Department of Education, shall perform the following program functions:

(1) Provide technical assistance to school health centers on effective outreach and enrollment strategies to identify children who are eligible for, but not enrolled in, the Medi-Cal program, ~~the Healthy Families Program~~ *Covered California*, or any other applicable *health insurance affordability program for children*.

(2) Serve as a liaison between organizations within the department, including, but not limited to, prevention services, primary care, and family health.

(3) Serve as a liaison between other state entities, as appropriate, including, but not limited to, the State Department of Health Care Services, the Department of Managed Health Care; *and the Office*

1 of Emergency Services, and the Managed Risk Medical Insurance
2 Board. Services.

3 (4) Provide technical assistance to facilitate and encourage the
4 establishment, retention, or expansion of, school health centers.
5 For purposes of this paragraph, technical assistance may include,
6 but is not limited to, identifying available public and private
7 sources of funding, which may include federal Medicaid funds,
8 funds from third-party reimbursements, and available federal or
9 foundation grant moneys.

10 (c) The department shall consult with interested parties and
11 appropriate stakeholders, including the California ~~School Health~~
12 ~~Centers Association~~ *School-Based Health Alliance* and
13 representatives of youth and parents, in carrying out its
14 responsibilities under this article.

15 SEC. 3. Section 124174.6 of the Health and Safety Code is
16 amended to read:

17 124174.6. The department shall establish a grant program
18 within the ~~Public School Health Center Support Program~~
19 *School-Based Health and Education Partnership Program* to
20 provide technical assistance, and funding for the expansion; and
21 renovation; and retrofitting of existing school health centers, and
22 the development of new school health centers, in accordance with
23 the following procedures and requirements:

24 (a) A school health center receiving grant funds pursuant to this
25 section shall meet or have a plan to meet the following
26 requirements:

27 (1) Strive to provide a comprehensive set of services including
28 medical, oral health, mental health, health education, and related
29 services in response to community needs.

30 (2) Provide primary and other health care services, provided or
31 supervised by a licensed professional, which may include all of
32 the following:

33 (A) Physical examinations, immunizations, and other preventive
34 medical services.

35 (B) Diagnosis and treatment of minor injuries and acute medical
36 conditions.

37 (C) Management of chronic medical conditions.

38 (D) Basic laboratory tests.

39 (E) Referrals to and followup for specialty care.

40 (F) Reproductive health services.

1 (G) Nutrition services.

2 (H) Mental health services provided or supervised by an
3 appropriately licensed mental health professional may include:
4 assessments, crisis intervention, counseling, treatment, and referral
5 to a continuum of services including emergency psychiatric care,
6 community support programs, inpatient care, and outpatient
7 programs. School health centers providing mental health services
8 as specified in this section shall consult with the local county
9 mental health department for collaboration in planning and service
10 delivery.

11 (I) Oral health services that may include preventive services,
12 basic restorative services, and referral to specialty services.

13 (3) *Strive to address the population health of the entire school*
14 *campus by focusing on prevention services such as group and*
15 *classroom education, schoolwide prevention programs, and*
16 *community outreach strategies.*

17 (4) *Strive to provide integrated and individualized support for*
18 *students and families and to act as a partner with the student or*
19 *family to ensure that health, social, or behavioral challenges are*
20 *addressed.*

21 ~~(3)~~

22 (5) Work in partnership with the school nurse, if one is employed
23 by the school or school district, to provide individual and family
24 health education; school or districtwide health promotion; first aid
25 and administration of medications; facilitation of student
26 enrollment in health insurance programs; screening of students to
27 identify the need for physical, mental health, and oral health
28 services; referral and linkage to services not offered onsite; public
29 health and disease surveillance; and emergency response
30 procedures. A school health center may receive grant funding
31 pursuant to this section if the school or school district does not
32 employ a school nurse. However, it is not the intent of the
33 Legislature that a school health center serve as a substitute for a
34 school nurse employed by a local school or school district.

35 ~~(4)~~

36 (6) Have a written contract or memorandum of understanding
37 between the school district and the health care provider or any
38 other community providers that ensures coordination of services,
39 ensures confidentiality and privacy of health information consistent

1 with applicable federal and state laws, and integration of services
2 into the school environment.

3 ~~(5)~~

4 (7) Serve all registered students in the school regardless of
5 ability to pay.

6 ~~(6)~~

7 (8) Be open during all normal school hours, or on a more limited
8 basis if resources are not available, or on a more expansive basis
9 if dictated by community needs and resources are available.

10 ~~(7)~~

11 (9) Establish protocols for referring students to outside services
12 when the school health center is closed.

13 ~~(8)~~

14 (10) Facilitate transportation between the school and the health
15 center if the health center is not located on school or school district
16 property.

17 (b) Planning grants shall be available in amounts between
18 twenty-five thousand dollars (\$25,000) and fifty thousand dollars
19 (\$50,000) for a 6- to 12-month period to be used for the costs
20 associated with assessing the need for a school health center in a
21 particular community or area, and developing the partnerships
22 necessary for the operation of a school health center in that
23 community or area. Applicants for planning grants shall be required
24 to have a letter of interest from a school or district if the applicant
25 is not a local education agency. Grantees provided funding pursuant
26 to this subdivision shall be required to do all of the following:

27 (1) Seek input from students, parents, school nurses, school
28 staff and administration, local health providers, and if applicable,
29 special population groups, on community health needs, barriers to
30 health care and the need for a school health center.

31 (2) Collect data on the school and community to estimate the
32 percentage of students that lack health insurance and the percentage
33 that are eligible for Medi-Cal benefits, or other public programs
34 providing free or low-cost health services.

35 (3) Assess capacity and interest among health care providers in
36 the community to provide services in a school health center.

37 (4) Assess the need for specific cultural or linguistic services
38 or both.

39 (c) Facilities and startup grants shall be available in amounts
40 between twenty thousand dollars (\$20,000) and two hundred fifty

1 thousand dollars (\$250,000) per year for a three-year period for
2 the purpose of establishing a school health center, with the potential
3 addition of one hundred thousand dollars (\$100,000) in the first
4 year for facilities construction, purchase, or renovation. Grant
5 funds may be used to cover a portion or all of the costs associated
6 with designing, retrofitting, renovating, constructing, or buying a
7 facility, for medical equipment and supplies for a school health
8 center, or for personnel costs at a school health center. Preference
9 will be given to proposals that include a plan for cost sharing
10 among schools, health providers, and community organizations
11 for facilities construction and renovation costs. Applicants for
12 facilities and startup grants offered pursuant to this subdivision
13 shall be required to meet the following criteria:

14 (1) Have completed a community assessment determining the
15 need for a school health center.

16 (2) Have a contract or memorandum of understanding between
17 the school district and the health care provider, if other than the
18 district, and any other provider agencies describing the relationship
19 between the district and the school health center.

20 (3) Have a mechanism, described in writing, to coordinate
21 services to individual students among school and school health
22 center staff while maintaining confidentiality and privacy of health
23 information consistent with applicable state and federal laws.

24 (4) Have a written description of how the school health center
25 will participate in the following:

26 (A) School and districtwide health promotion, coordinated
27 school health, health education in the classroom or on campus,
28 program/activities that address nutrition, fitness, or other important
29 public health issues, or promotion of policies that create a healthy
30 school environment.

31 (B) Outreach and enrollment of students in health insurance
32 programs.

33 (C) Public health prevention, surveillance, and emergency
34 response for the school population.

35 (5) Have the ability to provide the linguistic or cultural services
36 needed by the community. If the school health center is not yet
37 able to provide these services due to resource limitations, the school
38 health center shall engage in an ongoing assessment of its capacity
39 to provide these services.

(6) Have a plan for maximizing available third-party reimbursement revenue streams.

(d) Sustainability grants shall be available *on a one-time basis* in amounts between ~~twenty-five~~ *fifty* thousand dollars ~~(\$25,000)~~ *(\$50,000)* and one hundred ~~twenty-five~~ thousand dollars ~~(\$125,000)~~ *(\$100,000)* for the purpose of ~~operating a school health center, or enhancing programming at a fully operational school health center, including oral health or mental health services.~~ *developing new and leveraging existing funding streams to support a sustainable funding model for school health centers. Examples of existing funding streams include school district funds available under the Local Control Funding Formula, federal Patient Protection and Affordable Care Act, or Mental Health Services Act.* Applicants for sustainability grants offered pursuant to this subdivision shall be required to meet all of the criteria described in subdivision (c), in addition to both of the following criteria:

(1) The applicant shall be eligible to become or already be an approved Medi-Cal provider.

(2) The applicant shall have ability and procedures in place for billing public insurance programs and managed care providers.

(3) The applicant shall seek reimbursement and have procedures in place for billing public and private insurance that covers students at the school health center.

(e) *Population health grants shall be available in amounts between fifty thousand dollars (\$50,000) and one hundred twenty-five thousand dollars (\$125,000) for a funding period of up to three years to fund interventions to implement population health outcomes and target specific health or education risk factors including, but not limited to, obesity prevention programs, asthma prevention programs, early intervention for mental health, and alcohol and substance abuse prevention. Applicants for population health grants offered pursuant to this subdivision shall be required to meet all of the criteria described in subdivision (c).*

~~(e)~~

(f) The department shall award technical assistance grants through a competitive bidding process to qualified contractors to support grantees receiving grants under subdivisions (b), (c), and (d). A qualified contractor means a vendor with demonstrated

1 capacity in all aspects of planning, facilities development, startup,
2 and operation of a school health center.

3 ~~(f)~~

4 (g) The department shall also develop a request for proposal
5 (RFP) process for collecting information on applicants, and
6 determining which proposals shall receive grant funding. The
7 department shall give preference for grant funding to the following
8 schools:

9 (1) Schools in areas designated as federally medically
10 underserved areas or in areas with medically underserved
11 populations.

12 (2) Schools with a high percentage of low-income and uninsured
13 children and youth.

14 (3) Schools with large numbers of limited English proficient
15 (LEP) students.

16 (4) Schools in areas with a shortage of health professionals.

17 (5) Low-performing schools with Academic Performance Index
18 (API) rankings in the deciles of three and below of the state.

19 ~~(g)~~

20 (h) Moneys shall be allocated to the department annually for
21 evaluation to be conducted by an outside evaluator that is selected
22 through a competitive bidding process. The evaluation shall
23 document the number of grantees that establish and sustain school
24 health centers, and describe the challenges and lessons learned in
25 creating successful school health centers. The evaluator shall use
26 data collected pursuant to Section 124174.3, if it is available, and
27 work in collaboration with the ~~Public School Health Center Support~~
28 ~~Program~~ *School-Based Health and Education Partnership*
29 *Program*. The department shall post the evaluation on its Internet
30 Web site.

31 ~~(h)~~

32 (i) This section shall be implemented only to the extent that
33 funds are appropriated to the department in the annual Budget Act
34 or other statute for implementation of this article.

35 SEC. 4. Section 1 of Chapter 381 of the Statutes of 2008 is
36 amended to read:

37 Section 1. The Legislature finds and declares all of the
38 following:

1 (a) (1) School health centers provide quality, age and
2 developmentally appropriate primary health care and other support
3 services on or near a public school campus.

4 (2) School health centers are primarily located in areas where
5 children are underserved, lack health insurance, and face significant
6 barriers to care.

7 (3) School health centers provide an optimal setting to promote
8 healthy lifestyles such as good nutrition and fitness and provide
9 preventive health care services such as obesity prevention to
10 children and families.

11 (4) School health centers increase access to care, reduce health
12 disparities and provide potential savings through better preventive
13 care and reduced emergency department utilization, drug
14 utilization, and inpatient treatment services.

15 (5) Children do better in school if they are healthy and have
16 received all of their immunizations and preventive annual exams.

17 (6) *School health centers can be integral to providing the entire*
18 *school community with prevention and health integration services*
19 *by working collaboratively with school staff and administrators*
20 *to meet the spectrum of health and prevention needs in a school*
21 *community.*

22 ~~(6)~~

23 (7) School health centers have proven to be particularly
24 important to the Latino population, with recent estimates showing
25 that approximately 49 percent of youth served at high school health
26 centers and 66 percent of children served at elementary school
27 health centers, are Latino.

28 ~~(7)~~

29 (8) School health centers support educational achievement, help
30 increase attendance rates, and allow educational resources to be
31 more effectively targeted toward learning.

32 ~~(8) The Governor has determined that there is a need to expand~~
33 ~~the number of sites of school health centers as discussed in his~~
34 ~~White Paper on School-Based Health Centers released in July~~
35 ~~2006.~~

36 (9) *The federal Patient Protection and Affordable Care Act*
37 *contains provisions that recognize the importance of school health*
38 *centers in the delivery of quality, affordable health care and that*
39 *would call for their expansion. Under the health care reform,*
40 *California is developing new strategies to increase access to health*

1 care and reduce health care costs through investing in prevention
2 services. School health centers are important sites through which
3 to increase child and adolescent access to health care services
4 and early identification of chronic diseases, such as asthma and
5 obesity, and high-risk health behaviors, such as mental health
6 disorders, substance abuse, and teen pregnancy, that significantly
7 impact health care costs later in life.

8 (10) Additionally, through education finance reform, California
9 has increased accountability strategies for school districts that
10 highlight the need for schools to address important health-related
11 indicators, such as chronic absenteeism.

12 (11) School-based health centers serve as an effective foundation
13 upon which schools and communities can build and implement a
14 community schools strategy providing a range of wrap-around
15 services to students and their families.

16 (b) It is the intent of the Legislature to support existing school
17 health centers and expand the number of health centers in
18 California, and that funds should be placed within the ~~Public~~
19 ~~School Health Center Support Program~~ *School-Based Health and*
20 *Education Partnership Program*, as defined under Article 10
21 (commencing with Section 124174) of Chapter 3 of Part 2 of
22 Division 106 of the Health and Safety Code.